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DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.info

Reply To:

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

September 1, 2005

TO:

All Integrated System Users

FROM:

Robert Greenless, Ph.D. CIG

Nancy Butram, Chief, RMD

SUBJECT: FRAUDULENT CLAIMING

Recently an IS Chat posting suggested to other IS users a workaround to avoid Medicare/Medi-Cal crossover claims being denied in the Integrated System (IS). The IS incorrectly mapped Medi/Medi claims in MHMIS when the rendering provider or the service location was not Medicare certified AND the service was not a face-to-face visit rendered in the office. These claims denied due to CICS Rules (Invalid Service Location). The crossover value in MHMIS should be set to H (provider/service location not certified). Providers were informed to hold these units until the system defect was resolved. However, the work around suggested by an IS user though IS Chat was to change the service location to "office."

Data (or the corresponding code representing the data) should be entered exactly as stated on the source document unless a correction is requested by the involved clinician or a responsible supervisor. Changing claim information so that it does not accurately represent the service provided could constitute fraudulent billing and may jeopardize a contract provider's status as a DMH contract provider or even expose the agency, including DMH in the case of a directly operated provider, to legal action.

Do not risk creating a fraudulent claim. If you have questions about how to properly claim for a service, call the Revenue Management Division at (213) 639-6329. If you have questions or concerns about how the IS processes a claim or claim type, call the DMH Help Desk at (213) 351-1335.

For additional information on this subject you may contact the Codes Liaison for your Service Area.

c: DMH Leadership Team Service Area Chiefs Norma Fritsche ACHSA